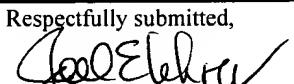




<b>PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)</b>		Attorney Docket Number SMD-002															
<p>In re Application of: Raike</p> <p>Application Serial No.: 09/912,403</p> <p>Filed: July 26, 2001</p> <p>Group Art Unit: 2137      Examiner: Nguyen, Minh Dieu T</p>																	
<p>This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a response in the above entitled application.</p> <p>The requested extension and appropriate non-small-entity fee are as follows (check time period desired)</p>																	
<table><tbody><tr><td><input checked="" type="checkbox"/></td><td>One month (37 CFR 1.17(a)(1))</td><td>\$ 120.00</td></tr><tr><td><input type="checkbox"/></td><td>Two months (37 CFR 1.17(a)(2))</td><td>\$</td></tr><tr><td><input type="checkbox"/></td><td>Three months (37 CFR 1.17(a)(3))</td><td>\$</td></tr><tr><td><input type="checkbox"/></td><td>Four months (37 CFR 1.17(a)(4))</td><td>\$</td></tr><tr><td><input type="checkbox"/></td><td>Five months (37 CFR 1.17(a)(5))</td><td>\$</td></tr></tbody></table>			<input checked="" type="checkbox"/>	One month (37 CFR 1.17(a)(1))	\$ 120.00	<input type="checkbox"/>	Two months (37 CFR 1.17(a)(2))	\$	<input type="checkbox"/>	Three months (37 CFR 1.17(a)(3))	\$	<input type="checkbox"/>	Four months (37 CFR 1.17(a)(4))	\$	<input type="checkbox"/>	Five months (37 CFR 1.17(a)(5))	\$
<input checked="" type="checkbox"/>	One month (37 CFR 1.17(a)(1))	\$ 120.00															
<input type="checkbox"/>	Two months (37 CFR 1.17(a)(2))	\$															
<input type="checkbox"/>	Three months (37 CFR 1.17(a)(3))	\$															
<input type="checkbox"/>	Four months (37 CFR 1.17(a)(4))	\$															
<input type="checkbox"/>	Five months (37 CFR 1.17(a)(5))	\$															
<p><input checked="" type="checkbox"/> Applicant claims small entity status under 37 CFR 1.27, therefore the fee amount shown above is reduced by one-half, and the resulting fee is: <u>\$60.00</u>.</p> <p><input checked="" type="checkbox"/> A check in the amount of the fee is enclosed.</p> <p><input type="checkbox"/> The Commissioner is hereby authorized to charge the required fee to Deposit Account No. 07-1700. Enclosed is a duplicate of this sheet.</p> <p><input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any additional fees which may be required, or credit any overpayment, to Deposit Account No. 07-1700.</p> <p><input checked="" type="checkbox"/> Return receipt postcard enclosed.</p>																	
<p>I am the <input type="checkbox"/> assignee of record of the entire interest. <input type="checkbox"/> applicant. <input checked="" type="checkbox"/> attorney or agent of record. <input type="checkbox"/> attorney or agent under 37 CFR 1.34.</p> <p>Registration number if acting under 37 CFR 1.34. _____.</p>																	
<b>CORRESPONDENCE ADDRESS</b>		<b>SIGNATURE BLOCK</b>															
Direct all correspondence to: Patent Administrator Goodwin Procter LLP Exchange Place Boston, MA 02109 Tel. No.: (617) 570-1000 Fax No.: (617) 523-1231 Customer No. 051414		<p>Date: December 5, 2005 Reg. No. 56,401 Tel. No.: (617) 570-1057 Fax No.: (617) 523-1231</p> <p>Respectfully submitted,  Joel E. Lehrer Atty/Agent for Applicant(s) Goodwin Procter LLP Exchange Place Boston, MA 02109</p>															

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